

UNITED STATES INTERNATIONAL TRADE COMMISSION

SUMMARY VOTING SHEET FOR RESPONSE ADEQUACY AND EXPEDITED OR FULL FIVE-YEAR REVIEW

Subject	Reference Information
<i>Cylindrical Roller Bearings from Japan: Investigation No. 731-TA-394 (Review)</i>	Control No. INV-99-586

Individual Responses (A = Adequate, I = Inadequate)	Bragg	Miller	Crawford	Hillman	Koplan	Askey	Commis- sion
Domestic (U.S. Producers)							
FAG Bearings Corp.	A	A	A	A	A	A	A
Link-Belt Bearing Division of Rexnord Corp.	A	A	A	A	A	A	A
Lipe-Rollway Corp.	A	A	A	A	A	A	A
MPB Corp.	A	A	A	A	A	A	A
New Hampshire Ball Bearings, Inc.	A	A	A	A	A	A	A
NTN-Bower Corp.	A	A	A	A	A	A	A
NTN-BCA Corp.	A	A	A	A	A	A	A
Roller Bearing Co. of America	A	A	A	A	A	A	A
SKF USA Inc.	A	A	A	A	A	A	A
The Torrington Co.	A	A	A	A	A	A	A
Respondent (U.S. Importers)							
Caterpillar Inc.	A	A	A	A	A	A	A
KCU	A	A	A	A	A	A	A
Nachi America Inc.	A	A	A	A	A	A	A
NSK Corp.	A	A	A	A	A	A	A
NBCA	A	A	A	A	A	A	A
NTN-Bower	A	A	A	A	A	A	A
Respondent (Foreign Producers/Exporters)							
Koyo Seiko Co., Ltd.	A	A	A	A	A	A	A
Nachi-Fujikoshi Corp.	A	A	A	A	A	A	A
NSK Ltd.	A	A	A	A	A	A	A
NTN Corp.	A	A	A	A	A	A	A

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SUMMARY VOTING SHEET FOR RESPONSE ADEQUACY AND EXPEDITED OR FULL FIVE-YEAR REVIEW—Continued

Subject	Reference Information
<i>Cylindrical Roller Bearings from Japan: Investigation No. 731-TA-394 (Review)</i>	Control No. INV-99-586

Group Responses (A = Adequate, I = Inadequate)	Bragg	Miller	Crawford	Hillman	Koplan	Askey	Commis- sion
DOMESTIC	<input type="checkbox"/> A	<input type="checkbox"/> A	<input type="checkbox"/> A	<input type="checkbox"/> A	<input type="checkbox"/> A	<input type="checkbox"/> A	<input type="checkbox"/> A
RESPONDENT	<input type="checkbox"/> A	<input type="checkbox"/> A	<input type="checkbox"/> I	<input type="checkbox"/> A	<input type="checkbox"/> A	<input type="checkbox"/> A	<input type="checkbox"/> A

Expedited or Full Review	Bragg	Miller	Crawford	Hillman	Koplan	Askey	Commis- sion
EXPEDITED: DOMESTIC GROUP INADEQUATE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
EXPEDITED: RESPONDENT GROUP INADEQUATE	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> X	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
FULL	<input checked="" type="checkbox"/> X	<input checked="" type="checkbox"/> X	<input type="checkbox"/>	<input checked="" type="checkbox"/> X	<input checked="" type="checkbox"/> X	<input checked="" type="checkbox"/> X	<input checked="" type="checkbox"/> X

SECRETARY'S CERTIFICATION OF COMMISSION ACTION

 _____ Secretary <i>ma</i>	Date 7/2/99
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